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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**☒ Declaration  
Submitted  
With Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number PU020291

First Named Inventor Carl Christensen, et al.

**COMPLETE IF KNOWN**

Application Number

/

Filing Date

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FULLY REDUNDANT LINEARLY EXPANDABLE BROADCAST ROUTER**

the specification of which

(Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

06/13/2003

as United States Application Number or PCT International

Application Number

PCT/US03/18821

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/390,845	06/21/2002	

[Page 1 of 2]

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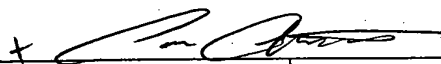
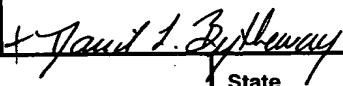
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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label				OR <input type="checkbox"/> Correspondence address below	
Name <u>JOSEPH S. TRIPOLI</u>					
Address <u>THOMSON LICENSING INC.</u>					
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Country <u>USA</u>		Telephone <u>(609-734-6834</u>		Fax <u>(609) 734 -6888</u>	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name <u>CARL</u>			Family Name <u>CHRISTENSEN</u> or Surname		
Inventor's Signature 					Date <u>31 July 2003</u>
Residence: City <u>South Jordan UT</u>		State <u>Utah</u>	Country <u>US</u>		Citizenship <u>US</u>
Mailing Address					
Mailing Address <u>2360 Bridle Oak Drive</u>					
City <u>South Jordan</u>		State <u>Utah</u>	ZIP <u>84095</u>	Country <u>US</u>	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name <u>DAVID LYNN</u>			Family Name <u>BYTHEWAY</u> or Surname		
Inventor's Signature 		Date <u>31 Jul 2003</u>			
Residence: City <u>Murray UT</u>		State <u>Utah</u>	Country <u>US</u>		Citizenship <u>US</u>
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Mailing Address <u>5957 Blue Stone Circle</u>					
City <u>Murray</u>		State <u>Utah</u>	ZIP <u>84123</u>	Country <u>US</u>	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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**DECLARATION****ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 3 of 3**

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
MITCHELL T.		HAYDEN	
Inventor's Signature <i>[Signature]</i>		Date <i>31 July 03</i>	
Residence: City	Syracuse UT	State	Utah
Country	US	Citizenship	US
Mailing Address			
Mailing Address 1530 South 1525 West			
City	Syracuse	State	Utah
ZIP	84075	Country	US
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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